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RELATIONSHIPS AMONG CHILD ABUSE EXPERIENCES, SOCIAL
SUPPORT, AND ACADEMIC SUCCESS

by

AMANDA MARIE HAVILL

A thesis submitted in partial fulfillment of the requirements
for the Honors in the Major program in Psychology
in the College of Sciences
and in The Burnett Honors College
at the University of Central Florida
Orlando, Florida

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Abstract

Previous research indicated that childhood abuse experiences are important factors in determining the length and achievement of individuals' academic careers (Braver, Bumberry, Green, & Rawson, 1992). Several additional studies suggested that there is a relationship between childhood abuse experiences and social support (i.e., parental, peer, and teacher; Ezzell, Swenson, & Brondino, 2000; Goebbels, Nichols, Walsh, & De Vries, 2008). Although these relationships were documented, few studies examined the relationships between childhood abuse experiences, social support, and academic success in one comprehensive analysis. As a result, the current study examined the relationships among childhood abuse experiences, social support, and academic success. More specifically, the current study examined the mediational role of social support in the relationship between childhood abuse experiences and academic success.

Participants completed four empirically validated questionnaires online. These questionnaires included a demographics questionnaire, the Student Perceived Availability of Social Support Questionnaire (SPASSQ; Vedder, Boekaerts, & Seegers, 2005), the Motivation to Achieve Academically Questionnaire (MAAQ; Waugh, 2002), and the Childhood Trauma Questionnaire (CTQ; Bernstein & Fink, 1998)). Using correlational analyses and regression analyses, results of the current study indicated that those individuals who reported childhood abuse experiences are more likely to have reported lower levels of parental support and that those who received a higher level of teachers' support are more likely to endorse academic success. Finally, childhood abuse experiences and social support generally were not significant predictors of academic success, and social support did not serve as a mediator in the relationship

between childhood abuse experiences and academic success. Nonetheless, understanding the childhood experiences that individuals bring with them into their later lives still may be important in fostering the best possible academic outcomes.

Dedication

To Daddy, who taught me hard work and determination can take you anywhere.

To Levi, who reminded me that life is what you make it.

And to Leah, who knew me best of all: I did it, just like you always said I would.

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The journey to write this thesis was a long and worthwhile one. I gained so much in the last year: experience, knowledge, skill, and relationships. I am so thankful for everyone that helped and supported me throughout the creation of this thesis.

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INTRODUCTION

Research has suggested that the experience of child abuse is an important factor in determining the length and achievement of individuals' academic careers (Braver, Bumberry, Green, & Rawson, 1992). Extant research also suggested that there is a relationship between the social support that children and adolescents receive from their parents and other important individuals and the psychological functioning that they experience after abuse has taken place. Even though these relationships were described in the literature, little research examined abuse experiences, social support, and academic functioning collectively in one comprehensive analysis (Braver et al. 1992). In fact, examining social support as a mediating factor might provide further insight regarding how abuse experiences are related to individuals' psychological functioning across their academic careers. Thus, examining the interrelationships among these variables may prove to be vital to interventions meant to restore the psychological, social, and academic functioning of individuals who have experienced child abuse. By addressing these variables and the possibility of a relationship between them, it may be possible to stop negative behaviors from developing as a result of childhood abuse experiences. As a result, the current study explored the relationships among child abuse, social support, and the academic performance of individuals who may have experienced abuse during their childhoods. \

Child Abuse

In the year 2008, an estimated 772,000 children were the victims of child abuse and/or neglect, with an estimated rate of victimization of 10.3 per 1,000 children (U. S. Department of Health and Human Services, 2008). These estimates are similar to those from previous years.

Rates of victimization were split almost evenly between the genders (i.e., 48.3% boys and 51.3% girls; U. S. Department of Health and Human Services, 2008). Of these children, 16.1% experienced physical abuse, 9.1% experienced sexual abuse, 7.3% were victims of psychological maltreatment (i.e., emotional abuse), and an astonishing 71.1% experienced neglect (U. S. Department of Health and Human Services, 2008). In addition to these rates for younger children and adolescents, child abuse is being reported more frequently by college-age students and is believed to account for an increase in the number of clients at university counseling centers (Braver et al., 1992).

Child abuse typically is described using three categories: sexual abuse, physical abuse, and emotional abuse (as noted in the statistics described above). The Federal *Child Abuse Prevention and Treatment Act* (CAPTA) provides the minimum descriptors that must be included in each state's definitions of abuse. CAPTA's minimum definition of abuse and neglect of a child is "any recent act or failure to act on the part of a parent or caretaker, which results in death, serious physical or emotional harm, sexual abuse, or exploitation, or an act or failure to act which presents an imminent risk of serious harm" (U. S. Department of Health and Human Services Administration for Children & Families, 2009, p. 1). Although defined at a federal level, each state has its own definition of child abuse as well. These definitions are meant to reflect each state's individual laws and state statutes. For example, Florida defines child abuse as "any willful act or threatened act that results in any physical, mental, or sexual injury or harm that causes or is likely to cause a child's physical, mental, or emotional health to be significantly impaired" (U. S. Department of Health and Human Services Administration for Children &

Families, 2009, p. 25). This definition includes acts of perpetration as well as omissions or failures to act on behalf of the affected child.

Definitions for each of the individual types of abuse also are offered. Sexual abuse is defined by CAPTA as “the employment, use, persuasion, inducement, enticement, or coercion of any child to engage in, or assist any other person to engage in any sexually explicit conduct or simulation of such conduct for the purpose of producing a visual depiction of such conduct; or the rape, and in cases of caretaker or interfamilial relationships, statutory rape, molestation, prostitution or other form of sexual exploitation of children, or incest with children” (U. S. Department of Health and Human Services Administration for Children & Families, 2009, p. 2). Further, CAPTA defines physical abuse as physical injuries perpetrated on a child in a manner that is not accidental. These injuries can include kicking, burning, striking, or biting a child or any other action that could result in the “physical impairment of the child” (U. S. Department of Health and Human Services Administration for Children & Families, 2009, p. 2). Finally, CAPTA defines emotional abuse as “injury to the psychological capacity or emotional stability of the child as evidenced by an observable or substantial change in behavior, emotional response or cognition, or as evidenced by anxiety, depression, withdrawal, or aggressive behavior” (U. S. Department of Health and Human Services Administration for Children & Families, 2009, p. 3).

Research suggested that the characteristics of abuse, beyond the kind of abuse that is experienced, also are important in predicting individuals’ outcomes. For example, prior research on abuse indicated that the long-term effects of abuse are correlated with characteristics of the abuse, such as the frequency with which the abuse occurred, the length of time over which the

abuse took place, the relationship between the child and his or her perpetrator, how intense the abuse was (Berliner & Elliott, 1996), and the “level of physical intrusiveness of the abuser” (Duncan, 2000, p. 987).

Given the potential long-term effects of past child abuse on individuals’ development, understanding how these effects are related to individuals’ outcomes (e.g., academic achievement) will provide important information for mental health professionals who work with individuals who have experienced abuse. For example according to Arata, Langhinrichsen-Rohling, Bowers, and O’Farrill-Swails (2002), physical abuse is related to individuals’ experience of depression and to their self-esteem. Consistently, research suggested that any type of past abuse experience is associated with an increased rate of suicidal tendencies and other life-threatening behaviors. In particular, Brown, Cohen, Johnson, and Smailes (1999) conducted a study that examined the specific effects that occur with different types of abuse. Their results indicated that adolescents who had been abused sexually have the highest rates of depressive disorders and suicide attempts. Sexual abuse also is associated with a higher rate of substance abuse (relative to physical abuse; Arata et al., 2002). Given that abuse is related closely to internalizing disorders (e.g., such as depression; Sachs-Ericsson et al., 2010; Sachs-Ericsson, Verona, Joiner, & Preacher, 2006), experiences of abuse during childhood also may be related to other outcomes, such as those related to academic performance. This relationship deserves to be studied further.

Academic Performance

Success with academic performance varies across individuals. Overall, however, Schelble, Franks, and Miller (2010) indicated that academic success contributes strongly to resiliency in children. They stated that academic success is tied closely to “critical aspects of healthy adult functioning” (e.g., higher education prospects, employment; Schelble et al., 2010, p. 290). In contrast, long-term abuse also may be related to academic performance in higher education settings. According to Duncan’s (2000) study that followed 210 college freshmen who had experienced abuse prior to beginning their college careers, 51% of abuse victims and 66% of nonvictims were enrolled by the second semester of their junior year. In this same study, 35% of multiple abuse victims, 50% of sexual abuse victims, and 60% of nonvictims still were enrolled in the last semester of their senior year. This steady decline implies that the experience of child abuse and post-traumatic stress is somehow related to college dropout rates (Duncan, 2000). In another study conducted by Eckenrode and colleagues (1993), results were thought to demonstrate a relationship between child abuse and poor academic performance, grade repetition, and discipline problems. Another finding was that generalizing the types of abuse (i.e., sexual, emotional, physical) was inappropriate, due to the idea that each type of abuse could affect different aspects of school performance in various ways (Eckenrode et al., 1993). Thus, the characteristics of the abuse that individuals have experienced also may be related to academic performances.

In a study conducted by Kinard (1999), results consistently showed that children suffering from abuse functioned at a lower academic level than nonabused peers. Those who had

been abused were more likely than those who had not been abused to be absent from school more frequently, to have lower grades in academic subjects, to have a higher incidence of being placed in special education programs, to be held back, and to have more school problems noted in their records (Kinard, 1999). In a similar study conducted by Leiter and Johnsen (1994), children who experienced childhood abuse have a significant deficit in academic performance when compared to the general school population. Further, early intervention with children who had experienced childhood abuse and their mothers may reduce the likelihood of their experiencing academic difficulties and behavioral problems (Kinard, 1999).

There may be other factors that are active in understanding individuals' academic performance following abuse experiences as well. For example, in a study conducted by Kinard (2001), individuals who experienced abuse appeared to overestimate their academic success as a way to compensate for low self-worth. Kinard attributed these individuals' negative views of themselves to a lack of support from their parents or guardians. Given these findings, children who have been abused may try to make up for their apparent shortcomings by overestimating their academic abilities in order to meet high expectations that are put upon them by others (e.g., their parents). To fully understand this relationship, however, a further understanding of the importance of social support in the relationship between the experience of childhood abuse and later academic performance is warranted.

Social Support

According to Cobb (1976), social support can be defined as knowledge from other individuals that one is cared for, loved, valued, and respected and is a part of a "network of

mutual obligations” (p. 379). Unfortunately, individuals who have experienced abuse in their childhoods seem to make ill use of the social support that is available to them (Muller, Gragtmans, & Baker, 2008). Social support is quite important, however, as it is related to improved self-esteem and competency in individuals who have experienced child abuse (Muller et al., 2008). As children progress developmentally, their main source of social support may change. For example, in childhood, children have a closer bond with their parents than with their peers. Adolescents, however, become more independent from their parents and become involved more closely with their peers (Seeds, Harkness, & Quilty, 2010). Consequently, the age of individuals who have experienced abuse may determine to whom they are closest and which types of support may be the most beneficial for them.

Nonetheless, research indicated that the impact of support varies with the severity of abuse and the individual who is providing the support (Ezzell, Swenson, & Brondino, 2000). Family and parental support is widely important to children’s adjustment (Ezzell et al., 2000; Vernberg, LaGreca, Silverman, & Pristein, 1996) at all ages throughout children’s development. Parents generally serve a nurturing role, providing their offspring with feelings of safety and protection (Ezzell et al., 2000; Hartup, 1989). Findings regarding family social support following abuse are mixed, however. For example, in a study conducted by Ezzell and colleagues (2000), families were rated as providing greater levels of social support than teachers. In another study, however, parental support was an “inconsistent predictor of children’s outcome after sexual abuse” (Bolen & Lamb, 2006, p. 44).

Other individuals also may provide social support. For example, research suggested that teachers' support (e.g., via reporting abuse and questioning children about marks or bruises) may be influenced by attitudes, knowledge, detection skills, training, personal characteristics, social influences, and the signs of abuse (Goebbels, Nichols, Walsh, & De Vries, 2008). Although teachers can be an important source of support, they may be reluctant to report signs of abuse, as such reports could damage the teacher-parent and teacher-child relationship. Other reasons for teachers' reluctance include fear of making an inaccurate report or fear that the abuse will escalate with a reporting of an incident (Goebbels et al., 2008). This aspect of support has received the least amount of attention.

Positive peer support also is believed to impact adjustment through companionship, feelings of acceptance, and intimacy (Ezzell et al., 2000; Furman & Buhrmester, 1992; Parker & Asher, 1993). Further, in a study conducted by Ezzell and colleagues (2000), peer support was related to reduced internalized symptoms. The benefits of peer support included individuals' experiencing decreased feelings of loneliness, greater validation, increased sense of belonging, and greater self-worth (Parker & Asher, 1993). In contrast, Tremblay, Hebert, and Piche (1999) failed to find a significant relationship between peer support and adjustment variables, perhaps because adolescents do not react to the disclosure of childhood abuse as a close adult (i.e., parent or teacher) might. Due to the private nature of childhood abuse, adolescents may not confide in their peers about their abuse experiences. In fact, such disclosure is thought to be rare among peers. It is thought that the age of the individual and their peers may be related to this decision to share information about abuse occurrences (Tremblay et al., 1999). Intimacy in a relationship

may not be welcome due to the fact that it could be thought to pose a threat, rather than express love and support. Thus, in order to avoid these situations, children may exhibit socially inappropriate behaviors (i.e. hyperactivity, lack of eye contact; Lowenthal, 1998). Given findings such as these, different kinds of social support may provide different benefits for individuals' academic performance in the context of past experiences of abuse.

Hypotheses

Given these findings, the current study seeks to examine the relationships among childhood experiences of abuse, social support, and success in academic performance. Further, the current study seeks to determine if social support serves as a mediator in the relationship between childhood experiences of abuse and success in academic performance. It is postulated that the variables examined in this study will be related significantly. In particular, it is expected that more significant experiences of child abuse during childhood will be related negatively to social support from parents and to academic performance but will be related positively to social support from other individuals. It also is expected that social support will be related positively to academic performance. Further, it is anticipated that both childhood experiences of abuse and social support will serve as significant predictors of success in academic performance. Finally, it is hypothesized that social support will serve as a mediating or protective factor in the relationship between childhood experiences of abuse and success in academic performance.

METHODS

Participants

Participants were undergraduate Psychology students from a large Southeastern university who were recruited via an online extra credit system (Sona Systems) in the Department of Psychology. Those who participated earned extra credit points for their participation in this study. No participants were excluded from this study as a result of their sex, ethnicity, or other characteristics. Participants were required to be at least 18-years of age, however. A total of 100 undergraduate Psychology students (i.e., 14 males, 83 females, and 3 who did not report their sex) are examined here for this thesis (although a sample of 494 were collected for this study for future investigation). Attempts were made to recruit approximately 107 participants who had abuse experience, based on a power analysis with an alpha level of .05 and a medium effect size. Significantly more participants completed the questionnaires than were needed; a total of 494 participants were recruited. Out of those 494, due to the use of validity questions included in each questionnaire, 281 were considered valid, with the remaining 213 considered invalid (as they answered at least one validity question incorrectly). Due to time constraints, a total of 100 valid participants were included in the current study's analyses. Students who participated in this study ranged in age from 18- to 45-years ($M=21.21$ -years, $SD=4.75$ -years). The majority of students who participated in this study classified themselves as Caucasian (73%). The remainder of the sample was ethnically diverse, as 14% classified themselves as Hispanic/Latino, 5% classified themselves as Black/African American, 3% classified themselves as Asian American, 3% classified themselves as being from a mixed ethnic

background, and 2% declined to answer. The participants varied in their class standing as well, as 31% of participants were Freshman, 15% were Sophomores, 32% were Juniors, 20% were Senior, and 2% were non-degree seeking students.

Measures

Demographics Questionnaire. A demographics questionnaire was designed for the current study. This measure asked for the participants' sex, age, ethnicity, class standing, marital status, family life characteristics, and parents' occupations. This measure also asked about participants' grade point averages (GPA) in college and in high school, their Standardized Aptitude Test score (SAT), and their Academic Comprehensive Test score (ACT).

Childhood Trauma. The *Childhood Trauma Questionnaire (CTQ)* (Bernstein & Fink, 1998) was chosen to assess abusive experiences in childhood. This measure is made up of 28 items that are rated on a Likert scale ranging from 1 (*never*) to 5 (*very often*). There are five subscales, each measuring a different type of childhood abuse experience: sexual abuse, physical abuse, emotional abuse, emotional neglect, and physical neglect. Scores on these subscales are calculated such that high scores indicate higher levels of abuse. A sixth subscale, called Minimization and Denial, consisted of three items: "I had the best family in the world," "There is nothing I would change about my family," and "I had the perfect childhood." The score on this subscale is calculated such that a high score would suggest that the rater is minimizing and denying any abuse experiences. The CTQ has exhibited high test-retest reliability and high internal consistency (Cronbach's alphas ranged from .79 to .94). This measure also has had high face validity, good discriminant validity with social desirability and an intelligence measure (i.e.,

verbal), and good convergent validity with the *Childhood Trauma Interview* (Bernstein et al., 1994).

Social Support. Social support was measured using the *Student Perceived Availability of Social Support Questionnaire* (SPASSQ; Vedder, Boekaerts, & Seegers, 2005). This scale consists of 11 school-related situations concerning instructional or emotional support. For every item, the participant specifies the degree to which they consider their parents, teachers, and peers to be relevant providers of support. The questionnaire consists of five scales (Vedder et al., 2005). In the current study, only three of the five scales are used, including the Emotional Support by Parents scale (*Cronbach alpha* = .86), the Emotional Support by Teachers scale (*Cronbach alpha* = .82), and the Social Support by Peers scale (*Cronbach alpha* = .91).

Academic Success. To assess academic success, the *Motivation to Achieve Academically Questionnaire* (MAAQ; Waugh, 2002) was chosen. This questionnaire consists of three first level orientations (i.e., desire to learn, striving for excellence, and personal incentives) that are further defined by the second level orientations (i.e., goals, standards, tasks, values, and effort). Subscales that assess motivation in terms of what participants do and what participants aim to do were used in the current study for each of the above first level orientations. The 24 stem-items are ordered from low to high and from “easy” to “hard.” The questionnaire is shown to be reliable and consistent and to have good content and construct validity (Waugh, 2002).

Procedure

Upon receiving IRB approval from the University of Central Florida, undergraduate student participants were recruited through Sona Systems, an online extra credit research recruitment system. All participants had to be at least 18-years of age and received extra credit toward a psychology class of their choosing upon completion of their participation. Most participants completed the surveys online, but there was a participant who came in for a data collection session that was held in the Psychology Building. All student participants who agreed to participate were required to read a consent form and were reminded that their answers would remain completely anonymous. Participants were able to withdraw from the study at any time without penalty. A researcher was available by telephone or email for those completing the survey online and present at the data collection session to answer any questions that may have arisen. Once the participants completed the questionnaires, they were provided with a debriefing form.

All data are stored securely on a password-protected computer in the laboratory of the faculty supervisor and in locked file cabinets in the locked laboratory of the faculty supervisor (for the paper packet that was completed). Consent forms did not require participants' signatures, ensuring that there was no difficulty in keeping the answered measures anonymous. Data was analyzed in a group format, and no packet was singled out for individual examination.

RESULTS

Descriptive Statistics

Data analyses for the current study were conducted using SPSS and included a variety of procedures. In order to determine participants' relative scores for each variable of interest, the mean scores and standard deviations were calculated and reported to examine the general standing of the participants relative to the possible range for each of the variables in the current study. Each questionnaire was broken down into subscales, and each subscale was examined. See Table 1 for the ranges, means, and standard deviations on each variable. With regard to abusive experiences in childhood, participants reported relatively low levels of physical neglect ($M = 6.64$, $SD = 2.94$), low levels of physical abuse ($M = 6.94$, $SD = 3.30$), low levels of emotional neglect ($M = 9.43$, $SD = 4.70$), low levels of emotional abuse ($M = 8.60$, $SD = 4.33$), low levels of sexual abuse ($M = 5.96$, $SD = 3.14$), and low levels of minimization and denial ($M = 9.80$, $SD = 3.39$) on average.

In terms of social support, participants endorsed low levels for the Frequency of Occurrence of Problems with Instruction and Learning subscale ($M = 23.51$, $SD = 3.22$) on average. The participants reported moderate levels of perceived parental support ($M = 26.45$, $SD = 7.71$), moderate levels of perceived emotional support from a teacher ($M = 21.69$, $SD = 4.89$), and moderate levels of perceived support from peers ($M = 28.18$, $SD = 7.15$) on average when compared to the possible range of scores available for this measure.

In terms of academic success, participants endorsed high levels for the MAAQ What I Aim For subscale ($M = 57.58$, $SD = 11.43$) on average. The participants also reported high levels

for the MAAQ What I Actually Do subscale ($M = 52.90$, $SD = 11.74$), high levels of the MAAQ Striving for Excellence (Aim For) subscale ($M = 27.38$, $SD = 5.44$), high levels of the MAAQ Striving for Excellence (Actually Do) subscale ($M = 26.13$, $SD = 5.58$), high levels of the MAAQ Desire to Learn (Aim For) subscale ($M = 20.94$, $SD = 4.48$), moderate levels of the MAAQ Desire to Learn (Actually Do) subscale ($M = 18.56$, $SD = 5.06$), high levels of the MAAQ Personal Incentives (Aim For) subscale ($M = 9.30$, $SD = 2.77$), and moderate levels of the MAAQ Personal Incentives (Actually Do) subscale ($M = 8.17$, $SD = 2.82$) on average when compared to the possible range of scores available for this measure.

Correlational Analyses

To examine the relationships among experiences of childhood abuse, social support, and academic success, correlational analyses of the variables were conducted. These correlations tested the hypotheses examining the relationships among experiences of childhood abuse, social support, and academic success, correlational analyses were examined among the measures used in the current study. Refer to Table 2 for these results. With regard to the relationship between experiences of childhood abuse and social support, there were significant relationships between experiences of physical neglect ($r = -.25$, $p < .01$), experiences of emotional neglect ($r = -.45$, $p < .001$), experiences of physical abuse ($r = -.22$, $p < .03$), experiences of emotional abuse ($r = -.38$, $p < .001$), experiences of sexual abuse ($r = -.24$, $p < .02$), and minimizing and denial ($r = .43$, $p < .001$) and perceived parental support. Thus, the greater the degree of childhood experiences, the less parental support that participants' reported. Further, experiences of sexual abuse were

related significantly to perceived teacher support ($r = .20, p < .05$), suggesting that the greater the degree of sexual abuse experiences, the greater the teacher support that participants endorsed. With regard to the relationship between experiences of childhood abuse and academic performance, experiences of physical abuse was related significantly to the MAAQ Desire to Learn (Aim For) subscale ($r = .21, p < .03$). With regard to the relationship between social support and academic performance, there also were significant relationships between perceived teacher support and the Frequency of Occurrence of Problems with Instruction and Learning subscale ($r = -.37, p < .001$), the MAAQ What I Aim For subscale ($r = .30, p < .003$), the MAAQ What I Actually Do subscale ($r = .34, p < .001$), the MAAQ Striving for Excellence (Aim For) subscale ($r = .24, p < .02$), the MAAQ Striving for Excellence (Actually Do) subscale ($r = .24, p < .02$), the MAAQ Desire to Learn (Aim For) subscale ($r = .33, p < .001$), the MAAQ Desire to Learn (Actually Do) subscale ($r = .35, p < .001$), and the MAAQ Personal Incentives (Actually Do) subscale ($r = .27, p < .007$). Perceived peer support also was related significantly with both the MAAQ Personal Incentives (Aim For) subscale ($r = .23, p < .02$) and the MAAQ Personal Incentives (Actually Do) subscale ($r = .27, p < .007$). Thus, support provided by teachers and peers, rather than that from parents, appeared to have important relationships to participants' academic success.

Regression Analyses

Regression analyses were conducted to determine significant predictors of academic success. In these analyses, the experience of childhood abuse and social support served as the predictor variables, and academic success variables served as the criterion variables. These

analyses were examined for any evidence of mediation with the procedure created by Baron and Kenny (1986). Due to the fact that these analyses were considered to be exploratory in nature, the alpha level was not constricted to control for experimentwise error rate. These regression analyses can be found in Tables 3 and 4.

Experiences of Childhood Abuse As Predictors of Social Support. Participants' experiences of childhood abuse did not predict significantly their occurrence of problems with instruction and learning, $F(6, 89) = 1.77, p < .11, R^2 = .10$. In contrast, participants' experience of childhood abuse predicted significantly parents' support, $F(6, 87) = 3.97, p < .001, R^2 = .21$. In this equation, no individual abuse subscales predicted significantly parents' support. Participants' experience of childhood abuse also predicted significantly teachers' support, $F(6, 91) = 2.42, p < .03, R^2 = .14$. With regard to the individual predictors in this equation, participants' experiences of physical abuse ($p < .06$), emotional neglect ($p < .06$), and sexual abuse ($p < .06$) were all marginal predictors of teachers' support. Finally, participants' experiences of childhood abuse did not predict significantly peer support, $F(6, 90) = 1.34, p < .25, R^2 = .08$. Thus, experiences of child abuse were only significant predictors of parents' and teachers' support.

Experiences of Childhood Abuse As Predictors of Academic Success. Participants' experience of childhood abuse did not predict significantly their MAAQ What I Aim For subscale score, $F(6, 90) = 1.01, p < .42, R^2 = .06$, or their MAAQ What I Actually Do subscale score, $F(6, 90) = 1.03, p < .41, R^2 = .06$. Participants' experiences of childhood abuse also did not predict significantly their MAAQ Striving for Excellence (Aim For) subscale score, $F(6, 90)$

= .93, $p < .47$, $R^2 = .05$, or their MAAQ Striving for Excellence (Actually Do) subscale score, $F(6, 90) = .92$, $p < .48$, $R^2 = .05$. Further, participants' experiences of childhood abuse did not predict significantly their MAAQ Desire to Learn (Aim For) subscale score, $F(6, 92) = 1.20$, $p < .31$, $R^2 = .07$, or their MAAQ Desire to Learn (Actually Do) subscale score, $F(6, 92) = .88$, $p < .51$, $R^2 = .05$. Participants' experiences of childhood abuse also did not predict significantly their MAAQ Personal Incentives (Aim For) subscale score, $F(6, 92) = .83$, $p < .55$, $R^2 = .05$, or their MAAQ Personal Incentives (Actually Do) subscale score, $F(6, 92) = 1.10$, $p < .37$, $R^2 = .06$.

When examining participants' actual performance in their academic settings, participants' experiences of childhood abuse did not predict significantly their high school grade point averages (GPAs), $F(6, 84) = .51$, $p < .80$, $R^2 = .03$, or their university grade point averages (GPAs), $F(6, 83) = .23$, $p < .96$, $R^2 = .01$. Participants' experiences of childhood abuse also did not predict significantly their Standardized Aptitude Test scores (SAT), $F(6, 61) = .48$, $p < .82$, $R^2 = .04$, or their Academic Comprehensive Test scores (ACT), $F(6, 47) = .62$, $p < .71$, $R^2 = .07$. Thus, participants' experiences of child abuse were not important predictors of participants' ultimate academic success.

Experiences of Childhood Abuse and Social Support As Predictors of Academic Success. Participants' experience of childhood abuse and social support from parents, teachers, and peers did not predict significantly the MAAQ What I Aim For subscale in either Block 1 when experiences of child abuse were entered, $F(6, 82) = .91$, $p < .49$, $R^2 = .06$, or Block 2 when social support variables were added, $F(10, 78) = 1.32$, $p < .23$, $R^2 = .14$. Participants' experience of childhood abuse and social support from parents, teachers, and peers did not predict

significantly the MAAQ What I Actually Do subscale in either Block 1 when experiences of child abuse were entered, $F(6, 82) = .98, p < .44, R^2 = .06$, or Block 2 when social support variables were added, $F(10, 78) = 1.67, p < .10, R^2 = .17$.

Participants' experience of childhood abuse and social support from parents, teachers, and peers also did not significantly predict MAAQ Striving for Excellence (Aim For) subscale in either Block 1 when experiences of child abuse were entered, $F(6, 82) = 1.15, p < .34, R^2 = .07$, or in Block 2 when social support variables were added, $F(10, 78) = 1.12, p < .35, R^2 = .12$.

Participants' experience of childhood abuse and social support from parents, teachers, and peers did not predict significantly the MAAQ Striving for Excellence (Actually Do) subscale in either Block 1 when experience of child abuse were added, $F(6, 82) = 1.03, p < .41, R^2 = .07$, or in Block 2 when social support variables were added, $F(10, 78) = 1.01, p < .44, R^2 = .11$.

Participants' experience of childhood abuse and social support from parents, teachers, and peers did not predict significantly the MAAQ Desire to Learn (Aim For) subscale in either Block 1 when experiences of child abuse were entered, $F(6, 83) = .93, p < .48, R^2 = .06$, or in Block 2 when social support variables were added, $F(10, 79) = 1.45, p < .17, R^2 = .15$.

Participants' experience of childhood abuse and social support from parents, teachers, and peers did not predict significantly the MAAQ Desire to Learn (Actually Do) subscale in either Block 1 when experiences of child abuse were entered, $F(6, 83) = .76, p < .60, R^2 = .05$, or in Block 2 when social support variables were added, $F(10, 79) = 1.66, p < .10, R^2 = .17$.

Participants' experience of childhood abuse and social support from parents, peers and teachers did not predict significantly the MAAQ Personal Incentives (Aim For) subscale in either

Block 1 when experiences of child abuse were entered, $F(6, 83) = 1.04, p < .41, R^2 = .07$, or in Block 2 when social support variables were added, $F(10, 79) = 1.49, p < .16, R^2 = .15$.

Experience of childhood abuse and social support from parents, teachers, and peers did not initially predict MAAQ Personal Incentives (Actually Do) subscale in Block 1 when experiences of childhood abuse were entered into the equation, $F(6, 83) = 1.25, p < .29, R^2 = .08$. With the addition of social support variables in Block 2, however, experiences of childhood abuse and social support predicted significantly MAAQ Personal Incentives (Actually Do), $F(10, 79) = 2.47, p < .01, R^2 = .23$. In particular, participants' peer support was a significant individual predictor ($p < .004$).

Participants' experience of childhood abuse and social support from parents, teachers, and peers did not significantly predict high school grade point average (GPA) in either Block 1 when experiences of child abuse were entered, $F(6, 75) = .53, p < .78, R^2 = .04$, or in Block 2 when social support variables were added, $F(10, 71) = .62, p < .79, R^2 = .08$. Participants' experience of childhood abuse and social support from parents, teachers, and peers did not significantly predict university grade point average (GPA) in either Block 1 when experiences of child abuse were entered, $F(6, 76) = .12, p < .99, R^2 = .01$, or in Block 2 when social support variables were added, $F(10, 72) = .73, p < .69, R^2 = .09$. Participants' experience of childhood abuse and social support from parents, teachers, and peers did not significantly predict Standardized Aptitude Test scores (SAT) in either Block 1 when experiences of child abuse were entered, $F(6, 57) = .54, p < .77, R^2 = .05$, or in Block 2 when social support variables were added, $F(10, 53) = .43, p < .92, R^2 = .07$. Participants' experience of childhood abuse and social

support from parents, teachers, and peers did not significantly predict Academic Comprehension Test scores (ACT) in either Block 1 when experiences of child abuse were entered, $F(6, 44) = .48, p < .82, R^2 = .06$, or Block 2 when social support variables were added, $F(10, 40) = .65, p < .76, R^2 = .14$.

DISCUSSION

The primary objective of the current study was to examine the relationships among experiences of childhood abuse, social support, and academic success in one comprehensive analysis (Braver et al., 1992). Previous research suggested that the relationships between experiences of childhood abuse and social support and between experiences of childhood abuse and academic success are plausible (Braver et al., 1992). Nonetheless, the findings of the current study did not confirm collective relationships among all these variables, as participants' experiences of childhood abuse were not related significantly to different measures of their academic success. As a result, it was not evident that social support mediated the relationship between participants' experiences of childhood abuse and their academic success.

Interestingly, childhood abuse experiences predicted significantly both parents' and teachers' support. Previous research has stated that parental and family support is imperative to children's adjustment at all ages throughout their development (Ezzell et al., 2000; Vernberg et al., 1996). With parents filling the role of nurturer in their child's life, they provide their offspring with feelings of security and protection (Ezzell et al., 200; Hartup, 1989). When abuse occurs, however, children may seek less support from their parents and turn to other adults in their lives (e.g., teachers). Creating strong teacher-child bonds could prove particularly beneficial, as teachers can be a strong source of support given the amount of time that they spend with their students. Although teachers may play a key role in noticing abuse signs, they may be reluctant to report signs of abuse for a variety of reasons, such as damaging the parent-teacher

and teacher-child relationships, making an inaccurate report, or causing the abuse to escalate once the abuse has been reported (Goebbels et al., 2008). More research on teacher support is necessary, as this aspect of support has received the least amount of attention. Nonetheless, rebuilding a strong parent-child relationship as well as strong relationships between children and their teachers may be helpful in the aftermath of abuse experiences. Such a focus also would be beneficial for abuse prevention programs.

In contrast, childhood abuse experiences failed to predict participants' academic success. This was contrary to findings in previous research studies, such as in the study conducted by Eckenrode and colleagues (1993). Their results were thought to demonstrate a relationship between child abuse experiences and poor academic performance, including grade repetition and discipline problems. The lack of findings in the current study may be due in part to the demographics of the sample population used here. Participants for the current study were recruited entirely from a four-year university. Thus, the participants met criteria for admission and may be relatively well-functioning. Further, it may be the case that the time between when participants had their childhood abuse experiences and then participated in this study was great enough that healing from these childhood experiences already had occurred or that these experiences were no longer affecting their functioning. Future research should examine a larger population with more generalizability opportunities and the possibility of a longitudinal design.

It also was hypothesized that social support would predict positively participants' academic success. In many cases, the findings of the current study supported this hypothesis. For example, perceived support from teachers was related to the participants' Frequency of

Occurrence of Learning and Instruction Problems, MAAQ What I Aim For, MAAQ What I Actually Do, MAAQ Striving for Excellence, and MAAQ Personal Incentives (Actually Do) subscale scores. Peer support also was a significant predictor of MAAQ personal incentives. Prior research indicates that the impact of support varies based on the severity of the abuse and the individual who is providing the support (Ezzell et al., 2000). For example, peer support was found to impact adjustment through companionship, intimacy, and feelings of acceptance (Ezzell et al., 2000; Furman & Burhmester, 1992; Parker & Asher, 1993). Such support may depend on individuals' relationship with the peers providing the support. Further, throughout children's development, their main source of social support may change. For example, young children are thought to rely more on parental support, and adolescents are thought to rely more on peer support as they become more independent (i.e., starting school, participating in after school activities; Seeds et al., 2010). Although adolescents may rely on their peers for the typical instances when social support is necessary (i.e., breaking up with a significant other, failing a class), the seriousness of abuse may cause adolescents to disclose sensitive information to an adult other than their parents. Thus, teachers may be particularly important for those individuals who have had childhood abuse experiences.

Finally, it was hypothesized that experiences of childhood abuse and social support would predict collectively participants' academic success. Unfortunately, childhood abuse experiences and social support did not predict academic success collectively, and social support did not serve as a mediator in the relationships between childhood abuse experiences and academic success. Little research has been conducted to examine the relationships between

childhood abuse experiences, social support, and academic success. One possible explanation for the lack of relationship in the current study's results may be the population sample size that was utilized for this survey. Recruiting participants from a four-year university, although convenient, is not a representative sample of the general population, which may have shown different results. Given these findings, it will be imperative for researchers and clinicians to collect information from a larger population in order to collect sufficient data on sensitive topics, such as childhood abuse experiences. Such an endeavor will be pursued as the next step in this line of research. Significantly more participants finished the questionnaires for the current study than could be examined in the timeframe for the current project; a total of 494 participants were recruited. New analyses will be conducted using the whole sample that was recruited with the hopes of expanding the understanding of the relationships among childhood abuse experiences, social support, and academic success.

The findings of the current study should be interpreted within the context of the study's limitations, which include a limited sample population, more female participants than male participants, and the relatively homogenous characteristics of the sample. In other words, the sample consisted primarily of Caucasian females that attend a four-year university, which could decrease the generalizability of the results of the current study to the general population. Additionally, as the current study used a convenience sample of university students, the correlational analyses may be restricted due to the implication that these participants met certain academic standards to be admitted to a prestigious southeastern university. The results may not be indicative of the relationships that may be noted if it had been conducted with the general

population, suggesting a lack of external validity. Also, given the exploratory nature of the current study, a correction for experimentwise error rate was not used. As a result, the correlations that proved significant could have been significant due to chance and/or not be as meaningful as hoped. Nonetheless, the correlations that proved to be significant appear to be consistent with the previous research conducted.

In spite of the limitations, the results of the current study may add to the literature regarding experiences of childhood abuse, social support, and academic success. The relationships among the variables examined in the current study may give insight to professionals working with students in various educational systems. The results dealing with academic success may be used to improve achievement and also give school professionals a chance to boost students' success through interventions such as student workshops, more focused assignments, and possibly an assigned after school tutor for additional assistance for students. Further, professionals may use the results of the current study to examine the further effects of support groups for students who have had experiences of childhood abuse. Although parents' and teachers' support were shown to be important in this study, further examination of these variables may prove to have some substance at a later date. Future research should continue to investigate the variables examined in the current study with larger sample sizes and a more generalized population. The impact of childhood abuse has been shown to be a significant one, as it affects individuals as well as their families and communities. Continuing research on this topic can only improve the current knowledge on the subject, allowing for benefits to those who have had abuse experiences and to society as a whole.

Table 1 Descriptive Statistics for Childhood Abuse, Social Support, and Academic Success

Variables (Range)	<i>M</i>	<i>SD</i>
<i>CTQ</i>		
Physical Neglect (5-24)	6.64	2.94
Physical Abuse (5-22)	9.43	4.70
Emotional Neglect (5-24)	8.60	4.33
Emotional Abuse (5-24)	5.96	3.14
Sexual Abuse (5-25)	9.80	3.39
Minimization and Denial (3-15)	6.64	2.94
<i>SPASSQ</i>		
Frequency of Occurrence of Instruction/Learning Problems (17-34)	23.51	3.22
Parental Support (11-44)	26.45	7.71
Peer Support (11-44)	28.18	7.15
Teacher Support (11-37)	21.69	4.89
<i>MAAQ</i>		
What I Aim For (17-72)	57.58	11.43
What I Actually Do (7-72)	52.90	11.74
Striving for Excellence (aim for) (9-33)	27.38	5.44
Striving for Excellence (actually do) (4-33)	26.13	5.58
Desire to Learn (aim for) (8-27)	20.94	4.85
Desire to Learn (actually do) (3-27)	18.56	5.06
Personal Incentives (aim for) (0-12)	9.30	2.77
Personal Incentives (actually do) (0-12)	8.17	2.82

Table 2 Correlations Among Childhood Abuse, Social Support, and Academic Success Ratings

Variables	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
Physical Neglect	-																	
Physical Abuse	.59 ***	-																
Emotional Neglect	.60 ***	.49 ***	-															
Emotional Abuse	.58 ***	.66 ***	.73 ***	-														
Sexual Abuse	.44 ***	.21 *	.31 **	.39 ***	-													
Minimization/Denial	-.52 ***	-.48 ***	-.80 ***	-.67 ***	-.37 ***	-												
Teacher Support	.12	.18	-.11	.04	.20	.03	-											
Parental Support	-.25 *	-.22 *	-.45 ***	-.38 ***	-.24 *	.43 ***	.26 *	-										
Peer Support	-.02	-.06	-.01	.01	-.15	.12	.11	-.05	-									
Frequency of Problems w/ Instruction/Learning	.14	.02	.11	.16	-.06	.01	-.37 ***	-.03	-.02	-								
What I Aim For	-.00	.12	.03	-.03	.01	-.10	.30 **	.02	.10	-.29 **	-							
What I Actually Do	.05	.12	.01	-.05	-.03	-.09	.34 ***	-.02	.14	-.28 **	.93 ***	-						
Striving Excellence (Aim for)	-.03	.05	-.04	-.09	.01	-.07	.23 *	.06	.02	-.28 **	.89 ***	.83 ***	-					
Striving Excellence (Actually do)	.06	.10	.00	-.06	-.02	-.09	.24 *	.01	.04	-.24 *	.85 ***	.88 ***	.93 ***	-				
Desire Learn (Aim For)	.10	.21 *	.13	.08	.06	-.16	.33 ***	-.06	.07	-.21 ***	.89 ***	.82 ***	.62 ***	.61 ***	-			
Desire Learn (Actually Do)	.09	.18	.07	.04	-.02	-.13	.35 ***	-.10	.14	-.22 ***	.81 ***	.91 ***	.61 ***	.65 ***	.86 ***	-		
Personal Incentives (Aim For)	-.09	.01	-.00	-.08	-.07	-.07	.17	.06	.23 *	-.26 ***	.83 ***	.76 ***	.62 ***	.59 ***	.67 ***	.64 ***	-	
Personal Incentives (Actually Do)	-.05	-.01	-.06	-.16	-.05	-.02	.27 **	.08	.28 **	-.26 ***	.73 ***	.79 ***	.52 ***	.50 ***	.64 ***	.71 ***	.83 ***	-

Note. * $p < .05$ ** $p < .01$ *** $p < .001$

Table 3 Summary of Regression Analyses for the Childhood Trauma Questionnaire

Regression/Variables	<i>B</i>	<i>SE B</i>	β
<i>Student Perceived Availability of Social Support Questionnaire</i>			
Frequency of Instruction/Learning $F(6, 89) = 1.77, p < .11, R^2 = .10$			
Physical Neglect	.23	.16	.21
Physical Abuse	-.22	.14	-.23
Emotional Neglect	.08	.13	.12
Emotional Abuse	.27	.13	.36*
Sexual Abuse	-.17	.12	-.17
Minimization/Denial	.27	.17	.29
Teacher Support $F(6, 91) = 2.42, p < .03, R^2 = .14$			
Physical Neglect	.14	.24	.09
Physical Abuse	.41	.21	.28
Emotional Neglect	-.37	.19	-.34
Emotional Abuse	-.04	.19	-.04
Sexual Abuse	.34	.18	.22
Minimization/Denial	-.02	.25	-.01
Parental Support $F(6, 87) = 3.97, p < .001, R^2 = .21$			
Physical Neglect	.23	.36	.09
Physical Abuse	.12	.33	.05
Emotional Neglect	-.44	.30	-.27
Emotional Abuse	-.22	.29	-.13
Sexual Abuse	-.25	.29	-.10
Minimization/Denial	.32	.37	.14
Peer Support $F(6, 90) = 1.34, p < .25, R^2 = .08$			
Physical Neglect	.08	.35	.03
Physical Abuse	-.19	.31	-.09
Emotional Neglect	.12	.29	.08
Emotional Abuse	.46	.29	.29
Sexual Abuse	-.45	.34	-.16
Minimization/Denial	.71	.36	.33

Motivation to Achieve Academically Questionnaire

What I Aim For $F(6, 90) = 1.01, p < .42, R^2 = .06$

Physical Neglect	-.49	.58	-.13
Physical Abuse	.98	.52	.29
Emotional Neglect	-.09	.48	-.04
Emotional Abuse	-.73	.47	-.28
Sexual Abuse	.18	.43	.05
Minimization/Denial	-.71	.61	-.21

What I Actually Do $F(6, 90) = 1.03, p < .41, R^2 = .06$

Physical Neglect	.05	.59	.01
Physical Abuse	.90	.53	.26
Emotional Neglect	-.25	.49	-.10
Emotional Abuse	-.80	.48	-.30
Sexual Abuse	-.12	.45	-.03
Minimization/Denial	-.79	.62	-.23

Striving for Excellence (Aim For) $F(6, 90) = .93, p < .47, R^2 = .05$

Physical Neglect	-.14	.28	-.07
Physical Abuse	.33	.25	.20
Emotional Neglect	-.18	.23	-.16
Emotional Abuse	-.33	.22	-.26
Sexual Abuse	.08	.21	.05
Minimization/Denial	-.44	.29	-.27

Striving for Excellence (Actually Do) $F(6, 90) = .92, p < .48, R^2 = .05$

Physical Neglect	.10	.28	.05
Physical Abuse	.34	.25	.21
Emotional Neglect	-.17	.24	-.14
Emotional Abuse	-.36	.23	-.28
Sexual Abuse	-.05	.21	-.03
Minimization/Denial	-.41	.30	-.25

Desire to Learn (Aim For) $F(6, 92) = 1.20, p < .31, R^2 = .07$

Physical Neglect	-.14	.24	-.08
Physical Abuse	.47	.22	.32*
Emotional Neglect	.09	.20	.09
Emotional Abuse	-.28	.20	-.25

Sexual Abuse	.09	.18	.06
Minimization/Denial	-.17	.25	-.12
Desire to Learn (Actually Do) $F(6, 92) = .88, p < .51, R^2 = .05$			
Physical Neglect	.03	.26	.02
Physical Abuse	.37	.23	.24
Emotional Neglect	-.09	.21	-.09
Emotional Abuse	-.20	.21	-.17
Sexual Abuse	-.09	.19	-.06
Minimization/Denial	-.28	.26	-.19
Personal Incentives (Aim For) $F(6, 92) = .83, p < .55, R^2 = .05$			
Physical Neglect	-.15	.14	-.16
Physical Abuse	.12	.12	.14
Emotional Neglect	-.01	.12	-.02
Emotional Abuse	-.14	.11	-.22
Sexual Abuse	-.03	.10	-.03
Minimization/Denial	-.20	.14	-.24
Personal Incentives (Actually Do) $F(6, 92) = 1.10, p < .37, R^2 = .06$			
Physical Neglect	-.02	.14	-.02
Physical Abuse	.14	.13	.16
Emotional Neglect	-.03	.12	-.05
Emotional Abuse	-.25	.12	-.38*
Sexual Abuse	-.00	.11	-.00
Minimization/Denial	-.20	.15	-.24

Grades/Scores

High School GPA $F(6, 84) = .51, p < .80, R^2 = .03$

Physical Neglect	-.03	.03	-.14
Physical Abuse	.01	.03	.05
Emotional Neglect	.01	.02	.12
Emotional Abuse	.01	.02	.06
Sexual Abuse	-.02	.02	-.11
Minimization/Denial	.02	.03	.13

University GPA $F(6, 83) = .23, p < .96, R^2 = .01$

Physical Neglect	-.02	.02	-.12
Physical Abuse	-.00	.02	-.02
Emotional Neglect	.01	.02	.13

Emotional Abuse	.00	.02	-.00
Sexual Abuse	.01	.02	.07
Minimization/Denial	-.00	.02	-.01
<i>SAT Scores</i> $F(6, 61) = .48, p < .82, R^2 = .04$			
Physical Neglect	24.51	17.09	.27
Physical Abuse	-7.81	16.01	-.09
Emotional Neglect	-11.75	16.04	-.19
Emotional Abuse	4.69	17.41	.06
Sexual Abuse	-20.81	16.77	-.19
Minimization/Denial	-5.48	20.13	-.06
<i>ACT Scores</i> $F(6, 47) = .62, p < .71, R^2 = .07$			
Physical Neglect	.12	.30	.07
Physical Abuse	.10	.26	.07
Emotional Neglect	-.17	.22	-.20
Emotional Abuse	-.09	.24	-.08
Sexual Abuse	-.50	.52	-.17
Minimization/Denial	-.02	.30	-.01

Note. * $p < .05$, ** $p < .01$, *** $p < .001$

Table 4 Hierarchical Regression Analyses

Variables	<i>B</i>	<i>SE B</i>	β
<i>What I Aim For</i>			
Block 1. $F(6, 82) = .91, p < .49, R^2 = .06$			
Physical Neglect	-.40	.62	-.11
Physical Abuse	1.02	.55	.29
Emotional Neglect	-.20	.53	-.08
Emotional Abuse	-.69	.50	-.27
Sexual Abuse	-.18	.70	-.04
Minimization/Denial	-.70	.66	-.20
Block 2. $F(10, 78) = 1.32, p < .23, R^2 = .14$			
Physical Neglect	-.35	.61	-.09
Physical Abuse	.66	.56	.19
Emotional Neglect	.07	.54	.03
Emotional Abuse	-.61	.51	-.24
Sexual Abuse	-.33	.73	-.07
Minimization/Denial	-.65	.67	-.19
Frequency of Problems w/ Instruction/Learn	-.52	.42	-.15
Parent Support	-.03	.19	-.02
Teacher Support	.49	.33	.20
Peer Support	.20	.19	.08
<i>What I Actually Do</i>			
Block 1. $F(6, 82) = .98, p < .44, R^2 = .06$			
Physical Neglect	.18	.62	.05
Physical Abuse	.91	.56	.26
Emotional Neglect	-.31	.53	-.12
Emotional Abuse	-.70	.50	-.27
Sexual Abuse	-.62	.71	-.12
Minimization/Denial	-.65	.66	-.19
Block 2. $F(10, 78) = 1.67, p < .10, R^2 = .17$			
Physical Neglect	.22	.61	.06
Physical Abuse	.52	.56	.15

Emotional Neglect	-.06	.53	-.02
Emotional Abuse	-.70	.50	-.27
Sexual Abuse	-.82	.72	-.16
Minimization/Denial	-.64	.66	-.18
Frequency of Problems w/ Instruction/Learn	-.44	.41	-.12
Parent Support	-.15	.19	-.10
Teacher Support	.62	.33	.25
Peer Support	.20	.18	.12
<hr/> <i>Striving for Excellence (Aim For)</i>			
Block 1. $F(6, 82) = 1.15, p < .34, R^2 = .07$			
Physical Neglect	-.19	.29	-.10
Physical Abuse	.36	.26	.22
Emotional Neglect	-.24	.25	-.21
Emotional Abuse	-.38	.24	-.31
Sexual Abuse	.11	.33	.05
Minimization/Denial	-.53	.31	-.32
Block 2. $F(10, 78) = 1.12, p < .35, R^2 = .12$			
Physical Neglect	-.15	.30	-.08
Physical Abuse	.22	.27	.13
Emotional Neglect	-.14	.26	-.12
Emotional Abuse	-.31	.24	-.25
Sexual Abuse	.06	.35	.03
Minimization/Denial	-.47	.32	-.28
Frequency of Problems w/ Instruction/Learn	-.28	.20	-.17
Parent Support	.03	.09	.04
Teacher Support	.13	.16	.10
Peer Support	.01	.09	.01
<hr/> <i>Striving for Excellence (Actually Do)</i>			
Block 1. $F(6, 82) = 1.03, p < .41, R^2 = .07$			
Physical Neglect	.06	.30	.03
Physical Abuse	.36	.27	.21
Emotional Neglect	-.22	.25	-.19
Emotional Abuse	-.41	.24	-.33

Sexual Abuse	-.04	.34	-.02
Minimization/Denial	-.49	.32	-.29
Block 2. $F(10, 78) = 1.01, p < .44, R^2 = .11$			
Physical Neglect	.10	.30	.05
Physical Abuse	.22	.28	.13
Emotional Neglect	-.13	.26	-.11
Emotional Abuse	-.35	.25	-.28
Sexual Abuse	-.13	.36	-.06
Minimization/Denial	-.44	.33	-.26
Frequency of Problems w/ Instruction/Learn	-.23	.21	-.13
Parent Support	-.03	.09	-.04
Teacher Support	.18	.16	.15
Peer Support	.01	.09	.01
<hr/> <i>Desire to Learn (Aim For)</i>			
Block 1. $F(6, 83) = .93, p < .48, R^2 = .06$			
Physical Neglect	-.10	.26	-.06
Physical Abuse	.50	.23	.33*
Emotional Neglect	.06	.22	.06
Emotional Abuse	-.21	.21	-.19
Sexual Abuse	-.08	.30	-.04
Minimization/Denial	-.06	.27	-.04
Block 2. $F(10, 79) = 1.45, p < .17, R^2 = .15$			
Physical Neglect	-.09	.26	-.06
Physical Abuse	.33	.24	.22
Emotional Neglect	.16	.22	.15
Emotional Abuse	-.20	.21	-.18
Sexual Abuse	-.21	.31	-.10
Minimization/Denial	-.07	.28	-.04
Frequency of Problems w/ Instruction/Learn	-.10	.18	-.07
Parent Support	-.07	.08	-.10
Teacher Support	.31	.14	.30*
Peer Support	.04	.08	.05
<hr/> <i>Desire to Learn (Actually Do)</i>			

Block 1. $F(6, 83) = .76, p < .60, R^2 = .05$

Physical Neglect	.10	.26	.06
Physical Abuse	.38	.24	.25
Emotional Neglect	-.11	.22	-.10
Emotional Abuse	-.10	.21	-.09
Sexual Abuse	-.37	.30	-.17
Minimization/Denial	-.13	.28	-.08

Block 2. $F(10, 78) = 1.66, p < .10, R^2 = .17$

Physical Neglect	.12	.26	.07
Physical Abuse	.22	.24	.14
Emotional Neglect	-.03	.22	-.03
Emotional Abuse	-.12	.21	-.11
Sexual Abuse	-.50	.31	-.23
Minimization/Denial	-.15	.27	-.10
Frequency of Problems w/ Instruction/Learn	-.09	.18	-.06
Parent Support	-.12	.08	-.18
Teacher Support	.33	.14	.31*
Peer Support	.08	.08	.11

Personal Incentives (Aim For)

Block 1. $F(6, 83) = 1.04, p < .41, R^2 = .07$

Physical Neglect	-.10	.15	-.10
Physical Abuse	.15	.14	.18
Emotional Neglect	-.05	.13	-.09
Emotional Abuse	-.10	.12	-.15
Sexual Abuse	-.22	.17	-.18
Minimization/Denial	-.16	.16	-.19

Block 2. $F(10, 79) = 1.49, p < .16, R^2 = .15$

Physical Neglect	-.09	.15	-.09
Physical Abuse	.10	.14	.11
Emotional Neglect	-.01	.13	-.02
Emotional Abuse	-.10	.12	-.16
Sexual Abuse	-.18	.18	-.15
Minimization/Denial	-.19	.16	-.22

Frequency of Problems w/ Instruction/Learn	-.13	.10	-.15
Parent Support	.02	.05	.05
Teacher Support	.03	.08	.06
Peer Support	.09	.05	.23*
<hr/> <i>Personal Incentives (Actually Do)</i>			
Block 1. $F(6, 82) = 1.25, p < .29, R^2 = .08$			
Physical Neglect	.06	.15	.06
Physical Abuse	.15	.14	.17
Emotional Neglect	-.04	.13	-.07
Emotional Abuse	-.19	.12	-.30
Sexual Abuse	-.23	.17	-.19
Minimization/Denial	-.12	.16	-.13
Block 2. $F(10, 78) = 2.47, p < .01, R^2 = .23$			
Physical Neglect	.06	.14	.06
Physical Abuse	.08	.13	.09
Emotional Neglect	.01	.12	.02
Emotional Abuse	-.22	.12	-.34
Sexual Abuse	-.18	.17	-.15
Minimization/Denial	-.17	.15	-.20
Frequency of Problems w/ Instruction/Learn	-.11	.10	-.12
Parent Support	.01	.04	.03
Teacher Support	.08	.08	.13
Peer Support	.13	.04	.32**
<hr/> <i>High School GPA</i>			
Block 1. $F(6, 75) = .53, p < .78, R^2 = .04$			
Physical Neglect	-.05	.03	-.28
Physical Abuse	.01	.03	.06
Emotional Neglect	.01	.03	.11
Emotional Abuse	-.02	.02	-.13
Sexual Abuse	.04	.03	.20
Minimization/Denial	-.00	.03	-.01
Block 2. $F(10, 71) = .62, p < .79, R^2 = .08$			
Physical Neglect	-.05	.03	-.29

Physical Abuse	.01	.03	.03
Emotional Neglect	.01	.03	.09
Emotional Abuse	-.01	.03	-.09
Sexual Abuse	.03	.04	.14
Minimization/Denial	.00	.03	-.00
Frequency of Problems w/ Instruction/Learn	.01	.02	.09
Parent Support	-.01	.01	-.08
Teacher Support	.01	.02	.13
Peer Support	-.02	.01	-.19

University GPA

Block 1. $F(6, 82) = .12, p < .99, R^2 = .00$

Physical Neglect	-.01	.02	-.10
Physical Abuse	.00	.02	.02
Emotional Neglect	.01	.02	.10
Emotional Abuse	.00	.02	.01
Sexual Abuse	-.00	.03	-.01
Minimization/Denial	.00	.03	.01

Block 2. $F(10, 78) = .73, p < .69, R^2 = .09$

Physical Neglect	-.01	.02	-.08
Physical Abuse	-.01	.02	-.06
Emotional Neglect	.02	.02	.19
Emotional Abuse	.01	.02	.11
Sexual Abuse	-.01	.03	-.03
Minimization/Denial	.01	.03	.07
Frequency of Problems w/ Instruction/Learn	-.03	.02	-.24
Parent Support	.00	.01	.08
Teacher Support	.01	.01	.10
Peer Support	-.00	.01	-.01

SAT Scores

Block 1. $F(6, 57) = .54, p < .77, R^2 = .05$

Physical Neglect	29.63	17.63	.35
Physical Abuse	-13.98	16.05	-.18
Emotional Neglect	-4.73	15.72	-.08

Emotional Abuse	7.67	17.40	.11
Sexual Abuse	-26.10	21.64	-.22
Minimization/Denial	2.84	20.15	.03
Block 2. $F(10, 53) = .43, p < .92, R^2 = .07$			
Physical Neglect	28.76	18.31	.34
Physical Abuse	-11.18	17.19	-.14
Emotional Neglect	-5.46	17.40	-.09
Emotional Abuse	2.78	18.65	.04
Sexual Abuse	-29.57	23.22	-.25
Minimization/Denial	.82	21.10	.01
Frequency of Problems w/ Instruction/Learn	10.90	13.74	.12
Parent Support	-3.93	6.09	-.11
Teacher Support	4.16	10.01	.07
Peer Support	2.00	7.17	.04
<hr/> <i>ACT Scores</i>			
Block 1. $F(6, 44) = .48, p < .82, R^2 = .06$			
Physical Neglect	.22	.30	.13
Physical Abuse	-.06	.27	-.04
Emotional Neglect	-.12	.22	-.14
Emotional Abuse	-.01	.24	-.01
Sexual Abuse	-.62	.52	-.22
Minimization/Denial	-.01	.31	-.01
Block 2. $F(10, 40) = .65, p < .76, R^2 = .14$			
Physical Neglect	.35	.32	.21
Physical Abuse	-.18	.28	-.13
Emotional Neglect	-.06	.23	-.10
Emotional Abuse	.09	.26	.09
Sexual Abuse	-.72	.55	-.26
Minimization/Denial	.06	.32	.05
Frequency of Problems w/ Instruction/Learn	-.30	.20	-.25
Parent Support	-.02	.10	-.05
Teacher Support	.10	.15	.12
Peer Support	-.01	.08	-.02

Note. * $p < .05$, ** $p < .01$

APPENDIX A: IRB APPROVAL FORM

APPENDIX A: IRB APPROVAL FORM



University of Central Florida Institutional Review Board
Office of Research & Commercialization
12201 Research Parkway, Suite 501
Orlando, Florida 32826-3246
Telephone: 407-823-2901 or 407-882-2276
www.research.ucf.edu/compliance/irb.html

Approval of Human Research

From: **UCF Institutional Review Board #1
FWA00000351, IRB00001138**

To: **Amanda Lowell and Co-PI: Amanda M. Havill**

Date: **January 13, 2011**

Dear Researcher:

On 1/13/2010, the IRB approved the following human participant research until 1/12/2012 inclusive:

Type of Review: UCF Initial Review Submission Form
Expedited Review Category #7
Project Title: Childhood Experiences and Later Functioning
Investigator: Amanda Lowell
IRB Number: SBE-11-07368
Funding Agency:
Research ID: N/A

The Continuing Review Application must be submitted 30 days prior to the expiration date for studies that were previously expedited, and 60 days prior to the expiration date for research that was previously reviewed at a convened meeting. Do not make changes to the study (i.e., protocol, methodology, consent form, personnel, site, etc.) before obtaining IRB approval. A Modification Form **cannot** be used to extend the approval period of a study. All forms may be completed and submitted online at <https://iris.research.ucf.edu>.

If continuing review approval is not granted before the expiration date of 1/12/2012, approval of this research expires on that date. When you have completed your research, please submit a Study Closure request in iRIS so that IRB records will be accurate.

Use of the approved, stamped consent document(s) is required. The new form supersedes all previous versions, which are now invalid for further use. Only approved investigators (or other approved key study personnel) may solicit consent for research participation. Participants or their representatives must receive a copy of the consent form(s).

In the conduct of this research, you are responsible to follow the requirements of the Investigator Manual.

On behalf of Joseph Bielitzki, DVM, UCF IRB Chair, this letter is signed by:

Signature applied by Joanne Muratori on 01/13/2011 02:15:00 PM EST

A handwritten signature in black ink that reads 'Joanne Muratori'.

IRB Coordinator

APPENDIX B: CONSENT FORM

APPENDIX B: CONSENT FORM

Childhood Experiences and Later Functioning Informed Consent

Principal Investigators: Amanda Havill and Amanda Lowell, Honors Thesis Students

Faculty Supervisor: Kimberly Renk, Ph.D.

Investigational Site: University of Central Florida, Department of Psychology

Introduction: Researchers at the University of Central Florida (UCF) study many topics. To do this, we need the help of people who agree to take part in a research study. You are being invited to take part in a research study, which will include up to 400 undergraduates from the University of Central Florida. You must be 18-years of age or older to be included in the research study.

The persons doing this research, Amanda Havill and Amanda Lowell, are Undergraduate Psychology students completing their Honors in the Major projects at the University of Central Florida. Because the researchers are students, Kimberly Renk, Ph.D., an Associate Professor of Psychology at UCF is serving as their supervisor for this research study.

What you should know about a research study:

- Someone will explain this research study to you.
- A research study is something you volunteer for.
- Whether or not you take part is up to you.
- You should take part in this study only because you want to.
- You can choose not to take part in the research study.
- You can agree to take part now and later change your mind.
- Whatever you decide it will not be held against you.
- Feel free to ask all the questions you want before you decide.

Purpose of the research study: The purpose of this research study is to examine how individuals' experiences from childhood are related to their functioning later in life. In fact, early experiences based in parent-child interactions, particularly in the context of disciplinary interactions, may have long-term effects on individuals that can be related to their functioning in many different ways (e.g., symptoms of depression, problems with eating behaviors, difficulties in school). The manner in which individuals attach to others and receive different forms of social support may be critical to the level of functioning that is achieved, even when individuals have had different childhood experiences. Little is known about attachment and social support as intervening factors in predicting different levels of functioning, however, particularly with regard

to emotional and behavioral functioning and academic success. As a result, there is a need to further examine the relationships of these variables to individuals' childhood experiences and their later functioning.

What you will be asked to do in the study: As part of this study, you will be asked to complete eight brief questionnaires that will take approximately one hour of your time. Sona Systems provides a link to the surveys. Alternatively, you will be able to complete a hard copy if you are unable to access the study online. Your responses as part of this study will be used to examine the relationships among childhood experiences in the context of parent-child interactions, social support, and academic achievement as well as the relationships among childhood experiences in the context of parent-child interactions, attachment style, and emotional and behavioral functioning.

Location: Research for this project will be conducted in one of two methods in a location of your choice. You may choose to fill out the questionnaires either on a secure online survey site or attend a group data collection session. If you complete the hard copy of questionnaires in a data collection session, you will be returning these questionnaires to the principal investigators immediately upon completion.

Time Required: We expect that you will participate in this research study for approximately one hour.

Risks: Although there are no anticipated risks that accompany your participation in this research study, it should be noted that some of the questionnaires that you will complete may bring up negative or unpleasant experiences from your childhood. Should you have a negative emotional reaction to any of the material presented, please notify the investigators or the faculty investigator listed on this form. In addition, you should consider contacting the University of Central Florida Student Counseling Center at 407-823-2811.

Benefits: One benefit of participating in this project is that you will learn first-hand what it is like to participate in a research project and you may learn more about yourself. For example, by completing the questionnaire packet, you will increase your awareness of your childhood experiences and emotional and behavioral functioning.

Compensation or Payment: Participants can expect to spend approximately one hour completing eight questionnaires and will receive extra credit toward a Psychology course of their choice through Sona Systems.

Confidentiality: We will limit your personal data collected in this study to people who have a need to review this information. This only includes basic demographic information. No names and identifying information will be collected. We cannot promise complete secrecy. Organizations that may inspect and copy your information include the IRB and other

representatives of UCF. You can be assured that we will not be able to link your identity to your responses, however, as we will not be asking you for your name as part of this consent process. Upon completion of the online surveys, your responses will be linked with an identification number only. The principal investigators will then transfer your survey responses from the secure online server to an SPSS database that only the investigators will be able to access via a password protected computer. Your online survey responses then will be deleted from the secure online server. Thus, your responses will be entirely anonymous. If you elect to complete a paper packet, your completed packet will be stored in a locked filing cabinet in a locked psychology laboratory in the Psychology Building at the University of Central Florida. Only research team members will handle your surveys. The completed packets will be entered into a database using a research identification number only.

Study contact for questions about the study or to report a problem: If you have questions, concerns, or complaints or think the research has hurt you, talk to Kimberly Renk, Ph.D., Faculty Supervisor, Department of Psychology, at 407-823-2218 or by email at krenk@mail.ucf.edu.

IRB contact about your rights in the study or to report a complaint: Research at the University of Central Florida involving human participants is carried out under the oversight of the Institutional Review Board (UCF IRB). This research has been reviewed and approved by the IRB. For information about the rights of people who take part in research, please contact: Institutional Review Board, University of Central Florida, Office of Research & Commercialization, 12201 Research Parkway, Suite 501, Orlando, FL 32826-3246 or by telephone at (407) 823-2901. You may also talk to them for any of the following:

- Your questions, concerns, or complaints are not being answered by the research team.
- You cannot reach the research team.
- You want to talk to someone besides the research team.
- You want to get information or provide input about this research.

Withdrawing from the study: There are no adverse consequences for choosing to withdraw from your participation in the study. The person in charge of the research study or the sponsor can remove you from the research study without your approval if you are not 18-years of age or older.

If you agree to participate in this research study, please click continue below.

APPENDIX C: DEMOGRAPHICS QUESTIONNAIRE

APPENDIX C: DEMOGRAPHICS QUESTIONNAIRE

Please circle, check, or fill in an answer to each of the following questions.

1. Gender: Male Female
2. Age: _____
3. Your ethnicity: _____
4. Year in college: Freshman Sophomore Junior Senior
Graduate Non-degree seeking Other: _____
5. Have you been out of school for more than one semester since high school? (Not including summer session.) Yes No

What is your current marital status? Single Married Divorced
Living with Partner Other:_____

Do you have any children (biological or adopted)? Yes No

8. a.) Do you live with your parent(s)? Yes No

****If “Yes”, continue to #9.**

If "No", do your parents pay for your living expenses (rent, utilities)?

Yes In part No

****If “Yes”, continue to #9.**

If “No”, do you pay your own living expenses?

Yes In part No

9. a.) How frequent is your contact with the person you consider you mother?

_____ At least once a day.

_____ Less often than once a day, but at least once a week.

Less often than once a week, but at least once every two weeks.

_____ Less often than every two weeks, but at least once a month.

Less often than once a month.

None.

- | | | |
|-------------------------------------|-----|----|
| b.) Is this your biological mother? | Yes | No |
|-------------------------------------|-----|----|

- a.) How frequent is your contact with the person you consider your father?

_____ At least once a day.

Less often than once a day, but at least once a week.

Less often than once a week, but at least once every two weeks.

_____ Less often than every two weeks, but at least once a month.
_____ Less often than once a month.
_____ None.

b.) Is this your biological father? Yes No

11. What is your mother's occupation? _____
What was the last grade that your mother completed in school? _____
12. What is your father's occupation? _____
What was the last grade that your father completed in school? _____
13. What is your family's average yearly income? _____
14. What was your high school grade point average (GPA)? _____
15. What is your current university GPA? _____
16. What did you score on the Standardized Aptitude Test (SAT)? _____
Was this on the 1600 or 2400 scale? _____
(If you did not take this test, please leave blank)
17. What did you score on the Academic Comprehensive Test (ACT)? _____
(If you did not take this test, please leave blank)

**APPENDIX D: THE MOTIVATION TO ACHIEVE ACADEMICALLY
QUESTIONNAIRE**

APPENDIX D: THE MOTIVATION TO ACHIEVE ACADEMICALLY

QUESTIONNAIRE

Please rate the 48 items according to the following response format and place a number corresponding to **What I aim for** and **What I actually do** on the appropriate line opposite each statement:

In all or nearly all my subjects	select 3
In most, though not all, my subjects	select 2
In some, though not most, of my subjects	select 1
In none or only one of my subjects	select 0

Example: If you **aim to set high standards** in academic work for all your subjects, select 3, **and if this only happens in some subjects**, select 1.

Item 1 I set myself high standards in academic work. 0 1 2 **③** 0 1 **②** 3

Item No.	Items	What I aim for	What I actually do
	Do my best to reach the academic standards that I set for myself.	0 1 2 3	0 1 2 3
	Evaluate my performance against the academic standards that I set myself.	0 1 2 3	0 1 2 3
	Try different strategies to achieve my academic goals when I have difficulties.	0 1 2 3	0 1 2 3
	Set myself realistic but challenging academic goals.	0 1 2 3	0 1 2 3
	Seek some average academic tasks in which I think I can succeed.	0 1 2 3	0 1 2 3
	Seek some difficult academic tasks in which I believe I can succeed.	0 1 2 3	0 1 2 3
	Seek some difficult academic tasks which I might be able to do.	0 1 2 3	0 1 2 3
	Make strong demands on myself to achieve in academic work.	0 1 2 3	0 1 2 3
	When I am given an academic task or assignment, I make a strong effort to find the right answers.	0 1 2 3	0 1 2 3
	Write and re-write my academic assignments in order to achieve.	0 1 2 3	0 1 2 3
	When I have conflicts about time to be spent on achieving, I re-think my values (social, parental, dates versus achievement).	0 1 2 3	0 1 2 3

Show interest in a number of academic topics.	0	1	2	3	0	1	2	3
Read widely on a number of academic topics.	0	1	2	3	0	1	2	3
Think about solving problems, with which others have difficulty, because I'm interested.	0	1	2	3	0	1	2	3
Participate in class discussions to improve my understanding in academic matters.	0	1	2	3	0	1	2	3
Ask questions of others to improve my understanding in academic matters.	0	1	2	3	0	1	2	3
Learn from others with more knowledge than I have.	0	1	2	3	0	1	2	3
Aim to learn from an expert in at least one academic area.	0	1	2	3	0	1	2	3
Take personal responsibility for my academic learning.	0	1	2	3	0	1	2	3
Plan to seek out information when necessary and take steps to master it.	0	1	2	3	0	1	2	3
Like the interaction with peers in solving problems in academic work.	0	1	2	3	0	1	2	3
Try to achieve academically because I like the challenges it brings.	0	1	2	3	0	1	2	3
Like the intellectual challenge of academic work.	0	1	2	3	0	1	2	3
Like the social relationships involved in academic work.	0	1	2	3	0	1	2	3

Notes

1. Item 'difficulties' are in logits (log odds of answering positively)
2. The lower the item 'difficulty', the 'easier' the item
3. The higher the item 'difficulty', the 'harder' the item
4. Items at the 'easiest' end of the scale are answered positively by almost all the students. Students need a high motivation to answer the 'hardest' items positively.
5. The 'What I aim for' items are 'easier' than the 'What I actually do' items.
6. The standard errors vary from about 0.09 to 0.20 (see Appendix 2)

Reference

Waugh, R. F. (2002). Creating a scale to measure motivation to achieve academically: Linking attitudes and behaviors using Rasch measurement. *British Journal of Educational Psychology*, 72, 65-86.

**APPENDIX E: THE STUDENT PERCEIVED AVAILABILITY OF SOCIAL
SUPPORT QUESTIONNAIRE**

APPENDIX E: THE STUDENT PERCEIVED ABILITY OF SOCIAL SUPPORT QUESTIONNAIRE

Items of the Frequency-of-Occurrence-of-Problems-with-Instruction-and-Learning subscale
Please select the frequency of each item.

Item No.	Item	Frequency			
	How often you do not understand a lesson?	never	not often	quite frequently often	very
	How often do you receive failing grades?	never	not often	quite frequently often	very
	How often does it happen that you want advice when you have a serious problem that you cannot resolve on your own?	never	not often	quite frequently often	very
	How often do you have problems with learning in school?	never	not often	quite frequently often	very
	How often do you have personal problems?	never	not often	quite frequently often	very
	How often do you feel the need that someone else shows that he or she shares in your happiness about a good grade?	never	not often	quite frequently often	very
	How often do you have problems with your homework?	never	not often	quite frequently often	very
	How often does it happen that you just can't get something right?	never	not often	quite frequently often	very
	How often do you want others to share in your happiness?	never	not often	quite frequently often	very
	How often do you feel the need to be comforted?	never	not often	quite frequently often	very

Items of the Perceived-Availability-of-Social-Support Subscale

Please select the frequency of each item for each person (Parent, Teacher, Peer).

Item no. Item Wording

When you don't understand a lesson, who can you count on to explain it to you?

Parent: hardly ever sometimes often always

Teacher: hardly ever sometimes often always

Peer: hardly ever sometimes often always

If you received a failing grade, when you thought your work was satisfactory, whom could you ask for an explanation of your grade?

Parent: hardly ever sometimes often always

Teacher: hardly ever sometimes often always

Peer: hardly ever sometimes often always

Who encourages you when your performance is weaker than usual?

Parent: hardly ever sometimes often always

Teacher: hardly ever sometimes often always

Peer: hardly ever sometimes often always

When you need advice, to whom can you turn?

Parent: hardly ever sometimes often always

Teacher: hardly ever sometimes often always

Peer: hardly ever sometimes often always

When you are not able to complete your schoolwork, whom can you ask for help?

Parent: hardly ever sometimes often always

Teacher: hardly ever sometimes often always

Peer: hardly ever sometimes often always

Whom can you go to with your personal problems?

Parent: hardly ever sometimes often always

Teacher: hardly ever sometimes often always

Peer: hardly ever sometimes often always

Who shows that he or she is happy when you perform well?

Parent: hardly ever sometimes often always

Teacher: hardly ever sometimes often always

Peer: hardly ever sometimes often always

Who is prepared to help you when you have problems with your homework?

Parent: hardly ever sometimes often always

Teacher: hardly ever sometimes often always

Peer: hardly ever sometimes often always

When you just can't get something right, whom can you count on to show how it's done?

Parent: hardly ever sometimes often always

Teacher: hardly ever sometimes often always

Peer: hardly ever sometimes often always

Who shares in your feelings when you are happy?

Parent: hardly ever sometimes often always

Teacher: hardly ever sometimes often always

Peer: hardly ever sometimes often always

Who shares in your feelings when you are sad?

Parent: hardly ever sometimes often always

Teacher: hardly ever sometimes often always

Peer: hardly ever sometimes often always

Reference

Vedder, P., Boekaerts, M., & Seegers, G. (2005). Perceived social support and well being in school: the role of students' ethnicity. *Journal of Youth and Adolescence*, 34, 269-278.

APPENDIX F: THE CHILDHOOD TRAUMA QUESTIONNAIRE

APPENDIX F: THE CHILDHOOD TRAUMA QUESTIONNAIRE

Childhood Trauma Questionnaire (Bernstein and Fink, 1998)

Please rate the frequency of each item during your childhood on a scale of 1 (Never) to 5 (Very Often) by completing the following sentence:

When I grew up...

Item No.	Items	Frequency				
		1	2	3	4	5
1.	I didn't have enough to eat.	1	2	3	4	5
2.	I knew that there was someone to take care of me and protect me.	1	2	3	4	5
3.	People in your family called me things like "stupid," "lazy," or "ugly."	1	2	3	4	5
4.	My parents were too drunk or high to take care of the family.	1	2	3	4	5
5.	There was someone in my family who helped me feel that I was important or special.	1	2	3	4	5
6.	I had to wear dirty clothes.	1	2	3	4	5
7.	I felt loved.	1	2	3	4	5
8.	I thought that my parents wished I had never been born.	1	2	3	4	5
9.	I got hit so hard by someone in my family that I had to see a doctor or go to the hospital.	1	2	3	4	5
10.	There was nothing I wanted to change about my family.	1	2	3	4	5
11.	People in my family hit me so hard that it left me with bruises or marks.	1	2	3	4	5
12.	I was punished with a belt, a board, a cord, or some other hard object.	1	2	3	4	5
13.	People in my family looked out for each other.	1	2	3	4	5
14.	People in my family said hurtful or insulting things to me.	1	2	3	4	5
15.	I believe that I was physically abused.	1	2	3	4	5
16.	I had the perfect childhood.	1	2	3	4	5

17.	I got hit or beaten so badly that it was noticed by someone like a teacher, neighbor, or doctor.	1	2	3	4	5
18.	I felt that someone in my family hated me.	1	2	3	4	5
19.	People in my family felt close to each other.	1	2	3	4	5
20.	Someone tried to touch me in a sexual way, or tried to make me touch them.	1	2	3	4	5
21.	Someone threatened to hurt me or tell lies about me unless I did something sexual with them.	1	2	3	4	5
22.	I had the best family in the world.	1	2	3	4	5
23.	Someone tried to make me do sexual things or watch sexual things.	1	2	3	4	5
24.	Someone molested me.	1	2	3	4	5
25.	I believe that I was emotionally abused.	1	2	3	4	5
26.	There was someone to take me to the doctor if I needed it.	1	2	3	4	5
27.	I believe that I was sexually abused.	1	2	3	4	5
28.	My family was a source of strength and support.	1	2	3	4	5

Secondary sources:

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Primary source/ Original reference:

Bernstein, D. P., Fink, L., Handelsman, L., & Foote, J. (1994). Initial reliability and validity of a new retrospective measure of child abuse and neglect. *American Journal of Psychiatry*, 151 (8), 1132-1136.

APPENDIX G: DEBRIEFING FORM

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POST PARTICIPATION INFORMATION

PROJECT: Childhood Experiences and Later Functioning

INVESTIGATORS: Amanda Havill, Amanda Lowell, & Kimberly Renk, Ph.D.

Thank you for participating in this research project. This project is being conducted so that we may find out more about the relationships among childhood experiences in the context of parent-child interactions, social support, and academic achievement as well as the relationships among childhood experiences in the context of parent-child interactions, attachment style, and emotional and behavioral functioning. As part of your participation, you completed several questionnaires inquiring about your childhood experiences (particularly those inquiring about discipline-related interactions as well as other difficult interactions), the social support that you have experienced, your attachment to other individuals, your academic performance, and your current emotional and behavioral functioning. The responses to these questionnaires will be used to explore the relationships among these variables. In particular, we are expecting that the effects of social support may reduce the long-term effects of difficult childhood experiences on later academic performance. We also are anticipating that positive attachment to others may provide a buffer against the long-term effects of difficult childhood experiences on later emotional and behavioral functioning. If so, these relationships may serve as a point of intervention for those who are experiencing difficulties.

If you would like more information about difficult childhood experiences, social support, attachment, academic performance, and emotional and behavioral functioning, please refer to the following sources:

Duncan, R. D. (2000). Childhood maltreatment and college drop-out rates: Implications for child abuse researchers. *Journal of Interpersonal Violence, 15*, 987-995.

Kent, A., & Waller, G. (2000). Childhood emotional abuse and eating psychopathology. *Clinical Psychology Review, 20*(7), 887-903.

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Wright, M. O., Crawford, E., & Del Castillo, D. (2009). Childhood emotional maltreatment and later psychological distress among college students: The mediating role of maladaptive schemas. *Child Abuse and Neglect, 33*, 59-68.

If you have any further questions about this research study, please contact Kimberly Renk, Ph.D., by phone (407-823-2218) or e-mail (krenk@mail.ucf.edu). If you feel that you would benefit from talking with a counselor about your own childhood experiences, please contact the UCF Counseling Center at 407-823-2811.

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